

Ryan M. Wise, Director

Kim Reynolds, Governor Adam Gregg, Lt. Governor

Response to DE Employee Request for Consent to Sell

Employee Name and Job Title: Buffy Campbell, School Improvement Consultant

Division, Bureau: Division of Learning and Results

Date of Request: 4/1/19

Date of Agency Determination: 4/3/19

Determination¹: Consent granted without condition

Summary of Request and Rationale for Determination:

Buffy Campbell seeks permission to sell the service of being a guest speaker for the lowa Principals Leadership Academy for the Keystone AEA. This work will be done during her personal time or on vacation, or during non-working hours, and on personal equipment.

The Department has oversight over AEAs in Iowa. However, the work that Mrs. Campbell will be involved in is not part of the work that she currently does for the Department. This outside employment will relate to managerial and leadership skills outside of the work Mrs. Campbell does for the Department.

Therefore, the sale of the service of service of being a Guest Speaker for the AEA will not cause Mrs. Campbell to advocate on behalf of any entity, does not benefit or prejudice any regulated person or entity, and does not result in a conflict of interest per section 68B.2A.

¹ If the determination is a denial or a conditional consent, the employee may file an appeal with the Iowa Ethics and Campaign Disclosure Board pursuant to rule 351—IAC 6.11(6).



STATE OF IOWA

KIM REYNOLDS, GOVERNOR ADAM GREGG, LT, GOVERNOR

Instructions:

DEPARTMENT OF EDUCATION RYAN M. WISE, DIRECTOR

DE Employee Request for Consent to Sell (See second page for Instructions)

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Employee Name Elizabeth Campbell Date 4-1-19
Job Title at DE (St/00) Improvement Conscitont
Division, Bureau at DE <u>Billeaut of Whod Improvement</u>
- Diviscon of Learning and Reputts
Immediate Supervisor at DE 1000 William 300
Proposed outside employer A Phuncipala Leader Day Ocadency Proposed services to sell to outside employer Secretary Shearth Catan Spen
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✓I certify that I have the permission of my DE supervisor, above named, to make this request of the Department of Education.
Signature of Employee
Signature of Employee's DE Supervisor

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